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LETTERS TO THE EDITOR

The editor is not responsible for opinions expressed in this department. All communications must be accompanied by the name and address of the writer to ensure publication.

A "BREAD AND MOLASSES" ENEMA

Dear Editor: On a recent case, on the night of my arrival, the doctor ordered a "bread and molasses" enema. As I had never heard of a bread and molasses enema, I decided it was a mistake and gave milk and molasses. The doctor next morning said he meant bread and molasses, and as he could not tell me the proportions, how to prepare, or the apparatus needed for giving it, I am writing you for information which will be greatly appreciated.

Massachusetts

L. M. M.

NEED FOR THE INTERSTATE SECRETARY

Dear Editor: Many nurses would appreciate information regarding the different nursing associations. Strange as it may seem, it is a fact that there are many nurses who do not know whether they belong to the American Nurses' Association, and have no idea what relation the county or district associations bear toward each other. They know they belong to their Alumnae, but no more than that. Also the Nurses' Relief Fund,—that, too, is like a strange language to many. I have taken measures to inquire regarding this subject, and I was indeed surprised to learn how few really knew anything about the different associations; the one thought seemed to be that the American Nurses' Association had something to do with THE AMERICAN JOURNAL OF NURSING. If you would publish an article sometime, giving information on this subject, I am sure it would be appreciated, for the JOURNAL is one issue in which all nurses are interested.

A. G.

PRIVATE DUTY NURSING

Dear Editor: The article of Mary Martin Brown, in the October JOURNAL, has shown a large part of my twenty years of nursing. I have a number of my patients with whom I correspond, whose children are married. I worked hard, and even saved lives which the doctor had pronounced past help. I answered calls where families were not financially able to pay high prices, but where the doctor would say they needed good nursing, yet I was called by some sister nurses a "cheap nurse." I met two devout Bible readers who said they would rather do nothing than go for less than \$25.00 per week, and that was more than twenty years ago, during the Spanish War. Can that be called true, helpful and religious work? I have had various experiences, tragic, comic, sad; all had their interesting points. Had I not been tied with home duties I would most gladly have offered my services for this past war. I read the JOURNAL with great interest although I may never be in active work again.

Florida

M. C. B.

COMPENSATION AND THE "EIGHT-HOUR DAY"

Dear Editor: I have listened to, and joined in, so many discussions lately on the subject of pay for nurses, it seems to me neither they, nor the public is getting a square deal. As things are at present, a nurse is paid the same flat rate of \$5 per day, whether she is on duty twenty-four hours, twelve, or even less. The public is nearly always required to employ two nurses, if service is required at all during the night, few nurses being willing to take what is known

as twenty-four-hour duty. Often the nurse is only required to sleep in her patient's house, to be called if needed; then again she may be on duty twice or oftener during the night. If the latter continues for some time, the nurse soon feels the strain; should she not receive more pay than the nurse on twelve-hour duty? A patient cannot always afford two nurses, though so situated as to need one within call. Graduate nurses are now talking of an eight-hour day. What will that mean to the public, \$15 per twenty-four hours? One solution of the difficulty might be the employment of eight-hour nurses at a stated sum per hour, twelve-hour nurses at the flat rate of \$5, and twenty-four-hour nurses paid additionally, according to the number of times she is called at night. This schedule would allow nurses a chance to work hard for more money, and those who wish the shorter hours would receive less remuneration. It might also educate the public to realize that twenty-four-hour duty should be paid for at a higher rate, and enable considerate people to have a nurse within call without paying \$10 for twenty-four hours. Expert mechanics are paid for time, and overtime, why not the expert nurse?

New York

A. B. C.

THE EIGHT-HOUR DAY IN TRAINING SCHOOLS

Dear Editor: The necessity and advantages of an eight-hour day for nurses in training are under so much discussion at the present time that all who have to do with training schools are putting forth every effort to a solution of this problem. In many instances it is a difficult one, and as we have solved it in quite a satisfactory manner, we are offering to the readers of the JOURNAL the ways and means adopted by us, hoping that the suggestions may be of help to superintendents who are planning to adopt a similar schedule. Many objections are raised from various sources, chief among them being the additional number of nurses required, the inefficiency of the nursing service resulting from the frequent changing of nurses, and the inconvenience caused by the irregularity of meal hours for the nurses. In regard to the first objection we find that but few nurses are needed in addition to the present number in training and these we supplied by employing from one to three graduates, as occasion required. Ours is a two hundred-bed hospital, with a daily average of one hundred and forty patients. Our nurses in training number forty-five and the successful adoption of an eight-hour day with that number seemed almost impossible, but we were willing to try, and this is how we did it. We have eleven departments composed of one exclusively medical, one exclusively surgical, four medical and surgical combined, a children's department, a maternity department, a nursery, the operating room and the diet kitchen. We established the new schedule for nurses in all departments except the operating room, where it was impracticable with the usual allotment. Nurses in this department are still working a nine-hour day with a half day weekly and every alternate Sunday free. In all departments except the maternity, nursery and diet kitchen, we have one nurse working from 7 a. m. to 3 p. m.; one from 3 p. m. to 11 p. m.; and one from 11 p. m. to 7 a. m., the latter being the regular night nurse. In the maternity department and nursery we have two nurses working those shifts, the work there being heavier. To supply sufficient help during the busy hours of the day we have a broken shift, from 7 a.m. to 12:30 p. m. and from 4 to 6 p. m., which takes care of the morning and evening work and the serving of trays. To meet a special requirement in two departments we have a relief shift, the nurse working from 7 to 11:30 a. m. in the one, and from 7 to 10:30 p. m. in the other. In the diet kitchen we manage by supplying a lay helper who relieves the two nurses weekly, in turn, at 12 m.